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Under	PATE	NT APPLICA	TION F	EE DETER for Form PTO-	MINATION	RECORD		Applicatio	n or Pocket Nur	95
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR NUMBER FIL			FILED) NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC	FEE						\$	OR		\$
TOTAL	R 1.16(a)) .CLAIMS		minus 20 =			x s=		OR	x s =	
INDEP	R 1.16(c)) ENDENT CLAIMS		ninus 3 =			x s =		OR	x s=	
(37 CFK 1.10(b))						+ 5 =		OR .	+ S=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL	,	OR	TOTAL	
* if the						TOTAL		1	-	
	CL	AIMS AS AME	NDED -	PART II					OTHER	THAN
_	16 10	(Column 1)		(Column 2)	(Column 3)	SMALL E	NTITY	OR •	SMALL	
⋖	/ 6	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
빵	Total	AMENDMENT	Minus	" / 5	=	x s =		OR	'x s =	
	(37 CFR 1.16(c)) Independent	9	Minus	4 5	=	x s =		OR	× S =	<u> </u>
ME	(37 CFR + *G(b))							OR	* 1 S/	
∢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s= TOTAL	-	OR	TOTAL ADD'L FEE	
						ADD'L FEE		J OR	ADD L FCC	
	(Column 1) (Column 2) (Column 3)							٠		
ENDMENT B		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	. RATE	ADDI- TIONAL FEE		: RATE	ADDI- TIONAL FEE
	Total	* AMENDMENT	Minus	**	=	x s =		OR	x s=	
	(37 CFR 1.16(c)) Independent	•	Minus	***	=	x s =		OR	x s =	
AME	(37 CFR 1.16(b)) (37 CFR 1.16(d))					+ \$ =		OR	. + s = _ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))						TOTAL	Ì	OR	TOTAL ADD'L FEE	
						ADD'L FEE	L	ا د		
(Column 1) (Column 2) (Column 3)								7	,	T
AMENDMENT C		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	AMENDMENT	Minus	**	=	x s=		OR	x s=	
	(37 CFR + 16(n))		Minus	***	=	x \$=		OR	x s=	
						+\$ =		OR	+ s=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					TOTAL	1	OR	TOTAL ADD'L FEE	
		d (1) 1 46.	on the est	rv in column 2. wi	rite "0" in column	ADD'L FEE 3.	L	ا`` ل	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. The spirit
		column 1 is less th t Number Previous Number Previousl	iy Paid Fo	IN THIS ST ACT	_ 13 1035 then ==	entor "2"				
1 .	** If the "Highest	Number Previous	iy Paid For	(Tetal or lodener	dent) is the high	est number found	in the approp	oriate box in	n column 1.	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.